

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re U.S. Patent Application

ITO *et al.*

Application 09/879,797

Filed: June 11, 2001

For: BIOCHIP AND METHOD FOR  
PRODUCING THE SAME

Attorney Docket No. HIRA.0072

Art Unit 1634

Examiner  
Forman, Betty J

**RECEIVED**  
JAN 29 2003  
TECH CENTER 1600/2900

Honorable Assistant Commissioner  
for Patents  
Washington, D.C. 20231

**COVER LETTER**

Sir:

[ ] The fee for submission of additional claims is calculated as shown below:

FOR	TOTAL WITH NEW CLAIMS ADDED	TOTAL CURRENTLY ON FILE	CLAIMS PAID	RATE	CALCULATION
Total Claims	9	9	-XX (Over 20)	x \$18	0
Independent Claims	3	2	-XX (Over 3)	x \$84	0
MULTIPLE DEPENDENT CLAIM(S)				+ \$280	0
REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28). IF APPLICABLE, VERIFIED STATEMENT MUST BE ATTACHED				x ½	
				TOTAL	0.00

In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

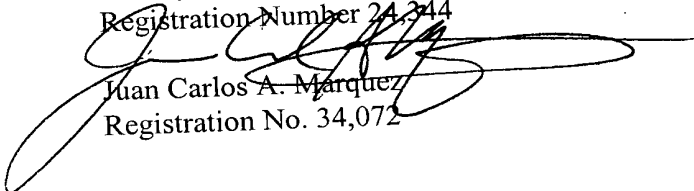
- ☒ [ x ] Response to Office Action  
(with Claim Amendments)
- ☐ [ ] Information Disclosure Statement
- ☐ [ ] Preliminary Amendment
- ☐ [ ] Substitute Specification
- ☐ [ ] Other \_\_\_\_\_

- ☐ [ ] Petition for Extension of Time
- ☐ [ ] Terminal Disclaimer
- ☐ [ ] Letter to Draftsperson
- ☐ [ ] Assignment
- ☐ [ ] Petition under \_\_\_\_\_

- [ ] Please charge my **Deposit Account Number** \_\_\_\_\_ in the amount of \_\_\_\_\_ to cover the fees for \_\_\_\_\_  
\_\_\_\_\_. A duplicate copy of this paper is enclosed.
- [ ] A check in the amount of **\$0.00** to cover the fee is enclosed.
- [x] The Commissioner is hereby authorized to charge any additional fees associated with this communication, including patent application filing fees and processing fees under 37 C.F.R. § 1.16 and 1.17, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,

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**January 28, 2003**

